



# UNIVERSITY-STUDENT UNION CALIFORNIA STATE UNIVERSITY, LOS ANGELES

**Administrative Office**  
5154 State University Drive, Room U-SU 306  
Los Angeles, CA 90032



## Full-Time Staff Application for Employment

The University-Student Union is an Affirmative Action/Equal Opportunity Employer; applicants will be considered without regard to their race, color, religion, marital status, national origin, sex, age, pregnancy, sexual orientation, disability, or other status protected by state or federal regulation within the limits imposed by law.

Please complete the entire application form, taking care to provide all information requested including salary history, employment dates, and a summary of duties performed for each job listed. A resume may be attached, but will be considered as supplemental only, and not as a replacement for information requested on the application. Failure to provide sufficient information, which shows evidence of meeting minimum qualifications, will result in disqualification or nonconsideration.

### General Information (Please Type or Print)

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Date:	Position Applying For:
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Name: Last, First, Middle	Telephone (Include Area Code) (     )
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Address: Number, Street, Apartment/Space Number	Cell phone (Include Area Code) (     )
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City, State, Zip Code	May we contact you at work? Yes [ ] No [ ]
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Are you currently enrolled as a student at CSULA? Yes [ ] No [ ]	Are you now or have you ever been employed by the University-Student Union, CSULA? Yes [ ] No [ ]     If so, when?
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Do you have any relatives who are employed by the University-Student Union, CSULA? Yes [ ] No [ ]	Name	Relationship	Department
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Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accomodation? Yes [ ] No [ ]     If no, describe the functions that cannot be performed:

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Have you been convicted for any offense, other than minor traffic violations or juvenile offense? (Complete if position requires driving) Yes [ ] No [ ]

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Have you been dismissed from employment?     If yes, please explain.  
Yes [ ] No [ ]

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Please list the current licenses/certificates held, professional achievements/publications.

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# Employment

**Resumes may be included but this employment portion of the application must be filled in completely.**

List your entire work record. Begin with your present job and list in reverse order. Include self-employment in excess of one month as a separate period. List each promotion as a separate job. Please account for all work history. Attach additional sheets as necessary. Include military or volunteer experience.

**MAY WE CONTACT YOUR PRESENT EMPLOYER?** Yes [ ] No [ ] Later [ ]

Dates of Employment From: _____ Mo. Yr. To: _____ Mo. Yr. Hours per Week _____ Last Salary: _____ Per: _____	Name of Employer or Company _____ Address, City, State, Zip Code _____ Supervisor's Name and Job Title _____ Your Job Title _____ Describe Your Duties: _____ _____ Reason for Leaving: _____	Telephone Number _____ _____ _____ _____ _____ _____
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Dates of Employment From: _____ Mo. Yr. To: _____ Mo. Yr. Hours per Week _____ Last Salary: _____ Per: _____	Name of Employer or Company _____ Address, City, State, Zip Code _____ Supervisor's Name and Job Title _____ Your Job Title _____ Describe Your Duties: _____ _____ Reason for Leaving: _____	Telephone Number _____ _____ _____ _____ _____ _____
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Dates of Employment From: _____ Mo. Yr. To: _____ Mo. Yr. Hours per Week _____ Last Salary: _____ Per: _____	Name of Employer or Company _____ Address, City, State, Zip Code _____ Supervisor's Name and Job Title _____ Your Job Title _____ Describe Your Duties: _____ _____ Reason for Leaving: _____	Telephone Number _____ _____ _____ _____ _____ _____
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Dates of Employment From: _____ Mo. Yr. To: _____ Mo. Yr. Hours per Week _____ Last Salary: _____ Per: _____	Name of Employer or Company _____ Address, City, State, Zip Code _____ Supervisor's Name and Job Title _____ Your Job Title _____ Describe Your Duties: _____ _____ Reason for Leaving: _____	Telephone Number _____ _____ _____ _____ _____ _____
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## Education

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Name and Address of High School Attended

Major Course of Study

Did you Graduate?

Yes [ ] No [ ]

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### College or University Education

Name and Address of Institution

Major

Number of  
Years Completed

Certificate/  
Diploma/Degree

Name and Address of Institution	Major	Number of Years Completed	Certificate/ Diploma/Degree

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List appropriate courses for this position and any other education, courses, certificates, seminars, etc. not listed above:

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List all your computer and software experience:

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### Additional Qualifications

Please identify any skill, knowledge or ability related to this position which would assist in the evaluation of your application.

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**References** List a minimum of THREE people, not related to you, who can attest to your professional abilities and expertise.

Name	Occupation/Title	Telephone Number
Address, City, State, Zip		
Name	Occupation/Title	Telephone Number
Address, City, State, Zip		
Name	Occupation/Title	Telephone Number
Address, City, State, Zip Code		

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The Immigration Reform and Control Act of 1986, Public Law 99-603, requires that employers obtain documentation from every new employee which confirms identity and authorizes that individual to accept employment in this country. This requirement applies to both United States citizens and aliens. Can you provide the necessary documentation at the start of employment?      YES [ ]    NO [ ]

This information may be used only for the purpose of employment in accordance with the Information Practices Act of 1977.

I hereby certify that the information contained in this application form is true, complete and correct to the best of my knowledge and agree to have any of the statements checked by the University-Student Union unless I have indicated to the contrary. I authorize the individuals and/or organizations, entities or agencies described in this application to release to the University-Student Union any and all information concerning my previous employment (including, but not limited to, achievement, performance, attendance, etc.) and any pertinent information that they may have. Further, I release all parties and persons from any and all liability for any damages that may result from furnishing such information to the University-Student Union as well as from the use of disclosure of such information by the University-Student Union or any of its agents, employees, or representatives. I understand that any misrepresentation, falsification, or material omission of information on this application may result in my failure to receive an offer or, if I am hired, may be considered cause for termination.

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Applicant's Signature

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Date

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